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Bib Data Sheet

CONFIRMATION NO. 5422

<b>SERIAL NUMBER</b> 10/506,911	<b>FILING OR 371(c) DATE</b> 09/02/2004 <b>RULE</b>	<b>CLASS</b> 607	<b>GROUP ART UNIT</b> 3762	<b>ATTORNEY DOCKET NO.</b> 13999-1US
<b>APPLICANTS</b> Jerrold S. Petrofsky, Redlands, CA;				
<b>** CONTINUING DATA *****</b> This application is a 371 of PCT/US03/07035 03/06/2003 which claims benefit of 60/363,036 03/06/2002				
<b>** FOREIGN APPLICATIONS *****</b> <div style="text-align: center;"><b>** SMALL ENTITY **</b></div>				
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged <u>Examiner's Signature</u> Initials		<b>STATE OR COUNTRY</b> CA	<b>SHEETS DRAWING</b> 5	<b>TOTAL CLAIMS</b> 21 <b>INDEPENDENT CLAIMS</b> 4
<b>ADDRESS</b> 23676				
<b>TITLE</b> Method and device for wound healing				
<b>FILING FEE RECEIVED</b> 102	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	